PP 5.76

PTO/SB/01 (03-01)
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DECLARATION FOR UTILITY OR

Attorney Docket Number

DESIGN	First Named Invento	or	Joseph C. Walsh		
PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number	/			
Declaration Declaration	Filing Date				
Submitted OR Submitted after Initial with Initial Filing (surcharge	Group Art Unit				
Filing (37 ČFR 1.16 (e)) required)	Examiner Name				
As a below named inventor, I hereby declare that:				-	
My residence, mailing address, and citizenship are as stated be				i	
I believe I am the original, first and sole inventor (if only one nar names are listed below) of the subject matter which is claimed a	ma in listed helevy as a second	original, fi	rst and joint inventor (if plural the invention entitled:		
TRANSFER GLUE SYSTEM AND ME GLUING MACHINE					
(Title of the Inv	rention)			Ì	
the specification of which					
is attached hereto				1	
OR					
was filed on (MM/DD/YYYY)	as United States A	pplication	Number or PCT International		
Application Number and was amend	ed on (MM/DD/YYYY)		(if applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
		ority laimed	Certified Copy Attached?	1	
			YES NO	1	
	[
Additional Control					
Additional foreign application numbers are listed on a supple	mental priority data sheel	PTO/SB	/02B attached hereto:	7	

[Page 1 of 2]

PTO/SB/01 (03-01)

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DECLARATION — Utility or Design Patent Application

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Direct all correspondence to: Customer Nur or Bar Code L				OR V Co	опеspondence address below	
Michael A. Goodwin, Esq. Name Klaas, Law, O'Meara & Malkin,	P.C.					
Address 1999 Broadway, Suite 2225			-			
City Denver			State	be Colorado	_{ZIP} 80202	
Country USA	Teleph	none (303)) 298	3-9888	Fax (303) 297-2266	
I hereby declare that all statements made herein of m are believed to be true; and further that these statem made are punishable by fine or imprisonment, or both validity of the application or any patent issued thereon.	nents w h unde	were made with	n the vi	KAAMIAAAA that williad &	foloo ototomonto and the lite	
NAME OF SOLE OR FIRST INVENTOR:		A petition h	as be	een filed for this uns	signed inventor	
Given Name Joseph C. (first and middle [if any])	<u>1Д</u>	\cap		ily Name Walsh urname		
Inventor's Signature					Date 1200 8 2001	
Residence: City Boulder		State Colora	ado	Country USA	Citizenship US	
Mailing Address 5532 La Plata Circle						
city Boulder	٤	State Colorac	do	ZIP 80301	Country USA	
NAME OF SECOND INVENTOR:] A	petition has	s beer	n filed for this unsig	aned inventor	
Given Name (first and middle [if any]) Kenneth E.			Family	ly Name Hawkin		
Inventor's Signature Humle E Heavy					Date 6/8/0/	
Residence: City Loveland	Sta	_{ate} Colorado	0 c	Country USA	Citizenship US	
Mailing Address 4205 S. W. 10th Street						
city Loveland	Sta	_{ate} Colorad	Jo z	_{ZIP} 80537	c untry USA	
Additional inventors are being named on the	supple	mental Addition	nal Inve	entor(s) sheet(s) PTO/5	SB/02A attached hereto.	

Please typ	a plus sign (+) inside this box	 →	+
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PTO/SB/81 (02-01)

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POWER OF	ATTORNEY OR
AUTHORIZA	TION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Joseph C. Walsh
Title	Transfer Glue System And
Group Art Unit	
Examiner Name_	
Attorney Docket Number	PP 5.76

I hereby appoint:				
Practitioners at Customer Number OR Practitioner(s) named below:	Place Customer Number Bar Code Label here			
Name	Registration Number			
William P. O'Meara	29,962			
Jay K. Malkin	31,393			
Michael A. Goodwin	32,697			
Stephen B. Katsaros	47,696			
as my/our attorney(s) or agent(s) to prosecute the application ide business in the United States Patent and Trademark Office cont	nected therewith.			
Please change the correspondence address for the above-identiful The above-mentioned Customer Number. OR Practitioners at Customer Number OR	fied application to: Place Customer Number Bar Code Label here			
Firm or Individual Name				
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Country				
Telephone	ax			
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.7 Statement under 37 CFR 3.73(b) is enclosed. (Form PTC)	1. D/SB/96).			
SIGNATURE of Applicantion Assigned	e of Record			
Name Joseph C. Walsh				
Signature				
Date 5000 8 TH 2001				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or forms if more than one signature is required, see below*.	their representative(s) are required. Submit multiple			
☑ *Total offorms are submitted.				

PTO/SB/81 (02-01)

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Application Number	
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First Named Inventor	Joseph C. Walsh
Title	Transfer Glue System And
Group Art Unit	
Examiner Name	
Attorney Docket Number	PP 5.76

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	K. Malkir		· · · · · · · · · · · · · · · · · · ·	29,9			
	ael A. G			31,			
	nen B. K			32,697			
				47,0	596		
business in the	United 8	agent(s) to prosecut States Patent and Tra	demark Office co	nnecte	d therewith	ı.	٠
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I am the: Applicant/Inventor.							
Assignee Stateme	e of reco nt under	rd of the entire intere 37 CFR 3.73(b) is en	st. See 37 CFR 3. oclosed. (Form P1	71. O/SB/	96).		
		SIGNATURE of A	pplicant or Assign	ee of F	Record		
Name	Kennet	h E. Hawkins					-
Signature	Kennt	& E Haci					
Date	6/8	108					
ioms il more than one s	the invent signature is	ors or assignees of record required, se below*.	of the entire interest	or their	representative	e(s) are required. Submit multiple	,
Total of 2	for	ns are submitted.					